PTO/88/06 (08-03)
Approved for use through 1/31/2006. OMB 0651-0032
U.S. Peleni and Trademerk Office; U.S. DEPARTMENT OF COMMERCE

_	PA	TENT APPLI	CATIO	N FEE DET	ERMINATIO	N RECORD	iomallon uni		ye e velid OMB	
PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								10/6583/2		
CLAIMS AS FILED - PART (Column 1) (Column 2)						SMALL	SMALL ENTITY		OTHER TIMN SMALL ENTITY	
FOR NUMBER			DERFILEC) NUM	BER EXTRA	RATE	FEE		RATE	ree
(31	SIC FEE CFR 1.16(a))]	1	OR		1
	TAL CLAIMS CFR 1.10(c))		minus 20 =					Off	x 1	
	CERTIO(U))	IMS	nilnue	3 , .		X 1 •		Он	x 1, •	1
ми	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						1	OR		İ
	 .				101	1	1	11	 	
* If the difference in column 1 is less than zero, enter "0" in column 7 CLAIMS AS AMENDED - PART II						JATOT	L	OK	101AL	L
	C	LAIMS AS AN	MENDE	D - PART II						
	(Column 1) (Column 2) (Column 3)				SMALL	ENTITY	on		R THAN ENTITY	
AMENDMENT A	2/14/0	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	HVIE	ADDI- TIONAL		RATE	ADDI TIONAL
OME	Total	3	Minus	20	1.	25.	FEE		.50.	FEE
ENC	Independent (31 CFR + 1601)	1	Minus	2		× 100.		OR	200	
ΑŽ	filest recogni	TATION OF MULTIPL	L DEPEN	ENTOLAN OTC	R 1 16(d1)			OR	**200	/
	l			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		TOTAL	<u> </u>	Oß	IOTAL	
						ADD'L FEE		OR	ADD'T FEE	
_		(Column 1)	T	(Column 2)	(Column 3)					
NT B		REMAINING AFTER AMCHDIMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI: TIONAL FEE		RATE	ADDI TIONAL TEE
AMENDMENT	Total OF CERTISO	•	Minus			A 5 =		OR		166
	(1) (/ E + +(c)-) Independent		Minus		,	, , =	:	Ot:). S :	
₹ 	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (3) CFR 1 (6)(1)					+ 5 :		Cit-		
						TOTAL ADDITEC		OB 1	TOTAL AUDIL FEE	
		(Column 1)		(Column 2)	(Calumn 3)			Ç-ri	SUDITEC	
Ţ	1	CLAIMS		HIGHEST	(Ceranii 3)			·	 1	
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID LOR	PRESENT EXTRA	RATE	IOOA JANOII 333		RATE	ADDI TAMPIT
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	Independent (III Creatign)	•	Minus	• • • • • • • • • • • • • • • • • • • •	;	x 5 =		OR .	K 5	
	FIRST PRESENTATION OF MULTIPLE DEPCHDENT QUAIN ()) CERT 16(0))					45		00		
						10TAL			TOTAL	
	If the only in cot	umi 1 is lass than	the entry	in column 2, knim	10" in Column 3	אסטנוננ [OR	אטטווננ [
	II the Trighest to II the Trighest No	umber Pressousty i inster Presincely f	Paid For I	IN THIS SPACE I	s less than 70, ai	nter 1701 or 13				
						number found in th	e annionnalo	that in tal	umo 1	

This country of the country 12-d of (Intal or Independent) is the taghed number found in the appropriate to an column 1.

This country of information is replied by 37 CF6. 1.6. The information is required to obtain a benefit by the neither which is to file (and by the CFF) to the constant of the period of confidentially is poweried by 35 CF6. 1.72 and 37 CF6. 1.13. This collection is estimated to large 12-days 12 months to complete in cluding gathering compared to controlled application than the CFC 1.72 and 37 CF6. 1.13. This collection is estimated to the individual case. Any comments on the amount of time and required to complete this form and or suggest instance turning this burden should be sent to the Controlled Discountry of the amount of time and Controlled this form and or suggest instance turning this burden should be sent to the Controlled Discountry of the amount of time and Controlled this form and or suggest instance turning this burden should be sent to the Controlled Discountry of the Amount of the Amount of the Amount of the Controlled Discountry of the Controlled Discountry of the Amount of the Amount of the Controlled Discountry of the Amount of the Controlled Discountry of the Amount of the Controlled Discountry of the Amount of the Amount of the Controlled Discountry of the Amount of the Controlled Discountry of the Controlled Discountr